## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

| CLAIMS AS FILED - PART I  (Column 1) (Column 2)  |  |   |  |                                   |                     |                                  | SMALL ENTITY TYPE   |                        | OR | OTHER THAN OR SMALL ENTITY |                        |
|--|--|---|--|-----------------------------------|---------------------|----------------------------------|---------------------|------------------------|----|----------------------------|------------------------|
| U.S. NATIONAL STAGE FEES   |  |   |  |                                   |                     |                                  | RATE                | FEE                    |    | RATE                       | FEE                    |
| BAS  | IC FEE   |   | SMALL ENT. =                                       | = \$ 150                          | LARG                | E ENT. = \$ 300                  | BASIC FEE           |                        | OR | BASIC FEE                  | 300                    |
| EXAMINATION FEE  |  |   | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$100 |                                   |                     | ner situations =<br>100 / \$ 200 | EXAM. FEE           |                        |    | EXAM. FEE                  | 200                    |
| SEARCH FEE   |  |   | I All other colinities = I                         |                                   |                     | ther situations = 250 / \$ 500   | SEARCH FEE          |                        |    | SEARCH FEE                 | 400                    |
| FEE FOR EXTRA SPEC. PGS.   |  |   | /55 minus 100 = (                                  |                                   |                     | / 50 = /                         | X \$ 125 =          |                        |    | X \$ 250 =                 | ८८८                    |
| тот  | AL CHARGEAB                                    | 3LE CLAIMS                                | /b minus 20 =                                      |                                   |                     |                                  | X \$ 25 =           |                        | OR | X \$ 50 =                  |                        |
| INDE   | EPENDENT CLA                                   | AIMS                                      | minus 3 = * -                                      |                                   |                     |                                  | X \$ 100 =          |                        | OR | X \$ 200 =                 |                        |
| MUL  | TIPLE DEPEN                                    | DENT CLAIM PRE                            | SENT   |                                   |                     |                                  | + \$ 180 =          |                        | OR | + \$ 360 =                 |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |  |                                   |                     | lumn 2                           | TOTAL               |                        | OR | TOTAL                      | 1129                   |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |  |   |  |                                   |                     |                                  | SMALL ENTITY        |                        | OR | OTHER THAN<br>SMALL ENTITY |                        |
| NT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHI<br>NUME<br>PREVIC<br>PAID I | BER<br>DUSLY        | PRESENT<br>EXTRA                 | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total  | *   | Minus  | **                                |                     | =                                | X \$ 25 =           |                        | OR | X \$ 50 =                  |                        |
| AME  | Independent                                    | *   | Minus  | ***                               |                     | =                                | X \$ 100 =          |                        | OR | X \$ 200 =                 |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                   |                     |                                  | + \$ 180 =          |                        | OR | + \$ 360 =                 |                        |
|  |  |   |  |                                   |                     |                                  | TOTAL ADDIT.<br>FEE |                        | OR | TOTAL ADDIT.<br>FEE        |                        |
|  |  | (Column 1)                                |  | (Colun                            | mn 2)               | · (Column 3)                     |                     |                        |    |                            |                        |
| IT B   |  | CLAIMS REMAINING AFTER AMENDMENT          |  | HIGHI<br>NUME<br>PREVIO<br>PAID I | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA                 | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total  | *   | Minus  | **                                |                     | =                                | X \$ 25 =           |                        | OR | X \$ 50 =                  |                        |
| AMEN   | Independent                                    | *   | Minus  | ***                               |                     | =                                | X \$ 100 =          |                        | OR | X \$ 200 =                 | <u></u>                |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                   |                     |                                  | + \$ 180 =          |                        | OR | + \$ 360 =                 |                        |
|  |  |   |  |                                   |                     |                                  | TOTAL ADDIT.<br>FEE | ·                      | OR | TOTAL ADDIT.<br>FEE        |                        |
| <ul> <li>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".</li> <li>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".</li> </ul> |  |   |  |                                   |                     |                                  |                     |                        |    |                            |                        |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.